

## CAMPAIGN EXPENSES

Report Period # AName (print) CITIZENS Protecting Douglas County  
Office (if applicable)

District (if applicable)

Expenses in Excess of \$100

Transfer Total Amount of All Campaign Expenses to Line 5 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
<u>Scarpello Hess + Oshinski</u>	<u>A</u>		<u>165</u>
<u>Annual Suing &amp; Filing + Research Agency</u>			

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